

## For Commission Use Only

Date Submitted to Board of County Commissioners: January 26, 2016

**Reference #:** 15-146

**Request:** Avera Heart Hospital - 8/22 thru 8/25/2015

**Amount:** \$ 42,519.69

**Recommendation of County Assistance Officer:** Deny - Has Medicaid

**Reference #:** 15-147

**Request:** Brookings Hospital -11/11 thru 11/15/2015

**Amount:** \$ 44,210.58

**Recommendation of County Assistance Officer:** Deny - Failure to response to application process  
Certified letter sent 4/05/2016 - Returned Unclaimed

**Reference #:** 15-155

**Request:** Avera Heart Hospital - 10/01 thru 10/02/2015

**Amount:** \$ 66,010.25

**Recommendation of County Assistance Officer:** Deny - Patient has begun making payments to hospital

**Reference #:** 16-001

**Request:** Rent

**Amount:** \$ 350.00

**Recommendation of County Assistance Officer:** Approved - One month past due rent - \$350.00

**Reference #:** 16-004

**Request:** Rent

**Amount:** \$ 575.00

**Recommendation of County Assistance Officer:** Approved - One month past due rent - \$575.00

**Reference #:** 16-021

**Request:** Rent

**Amount:** \$ 450.00

**Recommendation of County Assistance Officer:** Approved - One time past due rent - \$450.00

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**Request:**

**Amount:**

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